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1st Named Inventor: Stephen J. Brown Express Mail No.: EV 439337996 US

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Docket No.: 6858P056

### Agenda

Health Hero Network Background

Current Technology Solutions

Contribution to MedKnowledgeMent

Information and Knowledge Acquisition → The Feedback Loops

Contribution to Innovations

Linkage to Other Parts of Project

Patient Trials and Expected Outcomes

Blakely, Sokoloff, Taylor & Zafman LLP

(408) 947-8200 Title: Method and System For Integrating Feedback Loops in Medical

Knowledge Development and Healthcare Management

1st Named Inventor: Stephen J. Brown Express Mail No.: EV 439337996 US

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Hero Network Vision

A better model of care is possible

Crisis care → Coordinated

eHealth Networks and Technologies A Powerful Enabler

1st Named Inventor: Stephen J. Brown Express Mail No.: EV 439337996 US

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# h Hero Network

Founded 1988 in Mountain View, California. Health Hero Network Ltd established 2003 in Dublin, Ireland 25 employees, \$5 million annual sales, serving 30 provider sites and 2500 patients with daily in-home monitoring.

Solution Partners signed in Ireland, France, Netherlands. Expecting to add Spain, Belgium, Norway in 2003

Licensees include Veterans Health Affairs, Mercy Health System, American Medical Alert, TheraSense, Philips.

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## eHealth Demonstration Veterans Health Affairs (US)

Chronic care program using model of care based on eHealth Networks and Technologies from Health Hero Network 791 elderly high-risk patients with hypertension, heart failure, COPD, diabetes, enrolled for 1 year, compared to comparison group data

Results (Disease Management, Volume 5, Number 2, 2002)

63% reduction in hospital admissions

60% reduction in hospital bed days

64% reduction in nursing home admissions 40% reduction in emergency room visits

88% reduction in nursing home bed days

Significant improvement in Quality of Life

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eHealth Demonstration Mercy Health System (US) Diabetes management program using eHealth Networks and Technologies from Health Hero Network 169 low income diabetes patients, one year study period using comparative cohort data from previous calendar year Results (Diabetes Technology & Therapeutics Journal, Dec 2002)

Outpatient visits reduced 49% (p < 0.001)

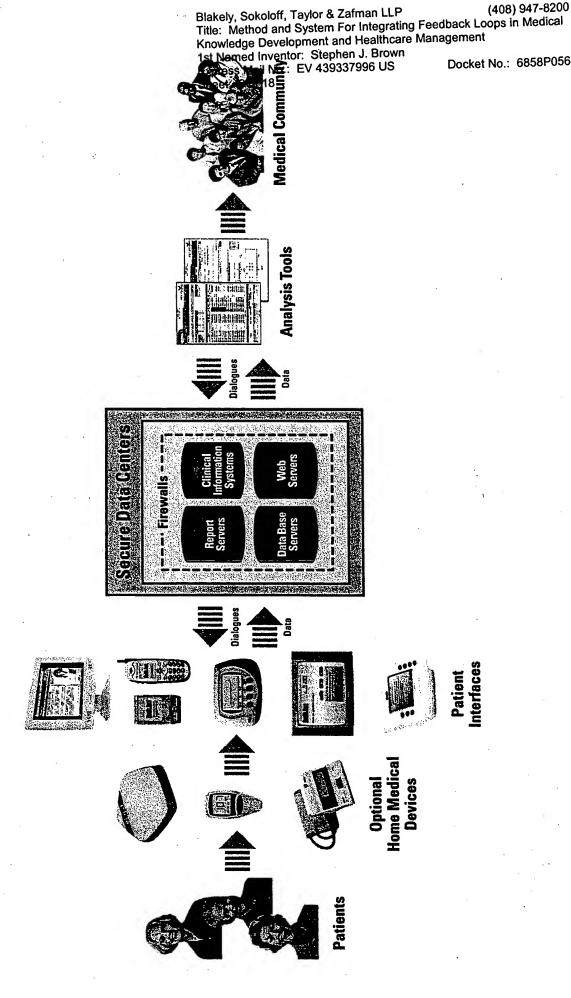
Inpatient admissions reduced 32% (p < 0.07)

ER encounters reduced 34% (p < 0.06)

Significant increase in quality of life scores

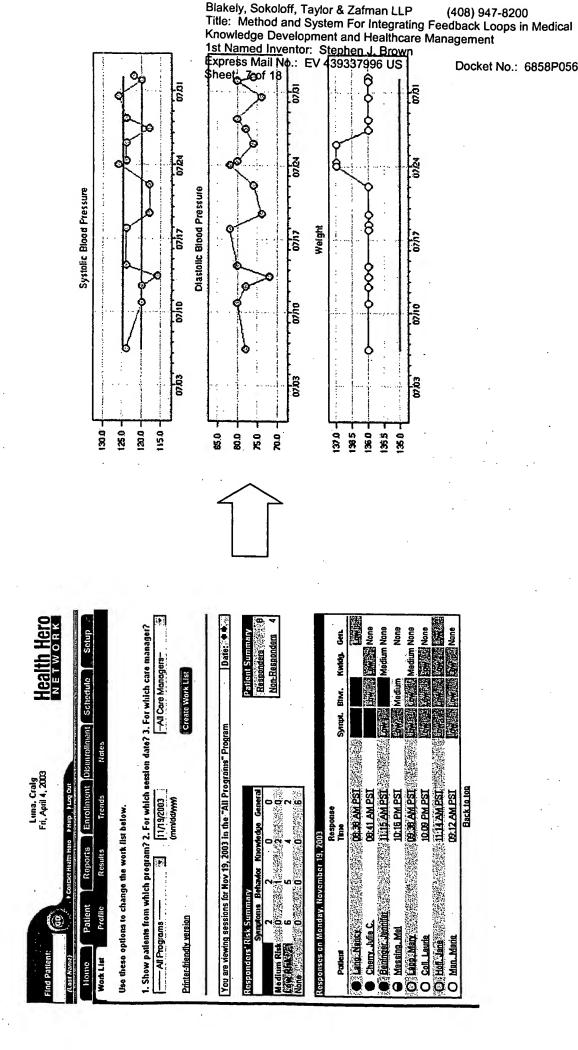
Medication compliance increased from 34% to 94%

### Innovation, Any Device, Any Disease, Many Partners Vision: Open System for Chronic Care Research and Health Hero Network Platform



# Decision Support Tools for Caregivers

Existing Clinical Information Systems and Care Processes Vision: Intelligent, Simple, Web-based, Integrated with

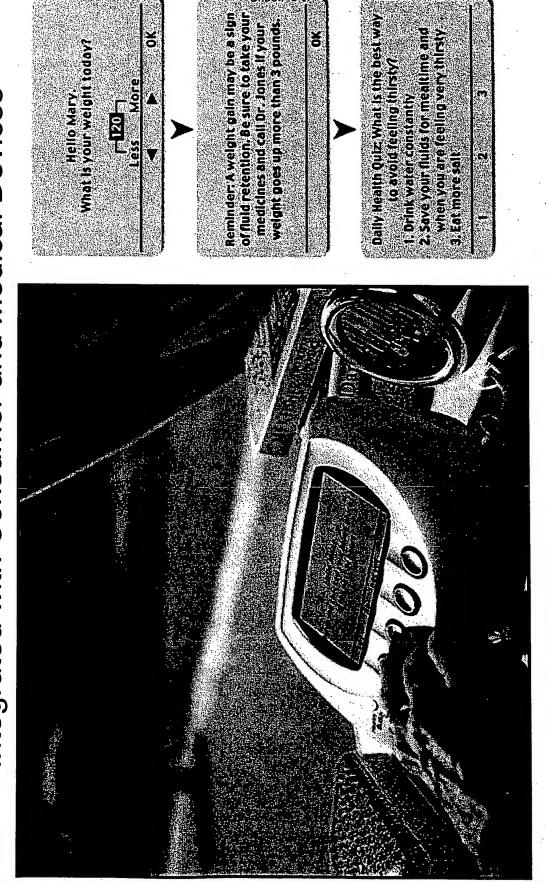


### (408) 947-8200 Blakely, Sokoloff, Taylor & Zafman LLP Title: Method and System For Integrating Feedback Loops in Medical Knowledge Development and Healthcare Management

1st Named Inventor: Stephen J. Brown

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### Vision: Intelligent, Interactive, Personalized, Simple, Integrated with Consumer and Medical Devices Daily Dialogue with the Patient



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### Vision: Based on Latest Medical Knowledge, Individualized Patient Dialogue Content Generating Real-time Information

		Diabetes Day	NETWORK
	Demo Library / Demonstration day dialogues COPD Day	Health Hero	ou may start at any time.
	Demo Library / Demonstration day dialogues Health Hero	or you! You may start at any	Blood sugar frend question:
	OF DAY, OLD	COPD, so that you can take the	othing to eat for 8 hours or oms )
Legend: O. No Wate O. Low Rist Jack  Welcome back, Patl That  [Greeling 2: None / General]	before first. B. High Risk. Ink you for using the Health Buddy. Begin whenever you are ready.	isease process / Knowledge] s and symptoms: Disease process	blood sugar? (Please use the jar). (BS Value trend: Blood sugar
Did you weigh yourself to	gh yourself today? [Did you welgh today?: Weight / Behavior]	3 days? [More S & S: None /	
	国What is your weight today? (Use the arrows to indicate your weight) [Weight trend: Weight / Symptoms ] 令(QWeight trend) > (M[HighWeight] +2 ) )	report this to your doctor today.	to sugar uncer / v is consugated to consugate to care a sugar source at is low, take your medicine, bals and snacks as by your doctor, [Response: Blood by your doctor, [Response: Blood
	in your usual weight. Sometimes heavy clothing or shoes. Please be	our doctor's instructions.	/ Symptoms ]
		, ng your doctor's instructions.	od sugar between 70-130 is e a healthy level. [Response: tiloring / Symptoms ]
	BRemember, if your weight is up 3 or more pounds, call Dr. Weiby today at 555-1212. [Heminder: Weight / Symptoms ]	ructions to keep up your health.	od sugar between 131-239 is dered to be moderately high.
•	OFelse  (Q(Q(Weight trend) = (M(HighWeight) +2))	ction are fever, coughing up reath. [Lung infection: Pulmonary./	your doctor. [Response: Blood / Symptoms ]
	This is somewhat higher than your usual weight. Sometimes weight can be affected by heavy clothing and shoes. Please be sure that	more shortness of breath than tcknowledge: Pulmonary /	ur doctor if you continue to have ar fevels for 3-4 days. [Response, ar monitoring / Symptoms.]
. •		or having more shortness of infection, [Instruct Pulmonary /	r over 240 is generally e too high. Remember to take
	OTrue  This is slightly higher than your usual weight. Sometimes weight can be affected by heavy richthne and shoes. Please he sum that you		
	weighed yourself without heavy clothing or shoes. [Slightly higher Weight / Symptoms ] ©Okay		
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1.1 Information and Knowledge Sources and Formats

Health Hero Network Contribution

to MedKnowledgeMent

1.2 Information Acquisition → Information Base

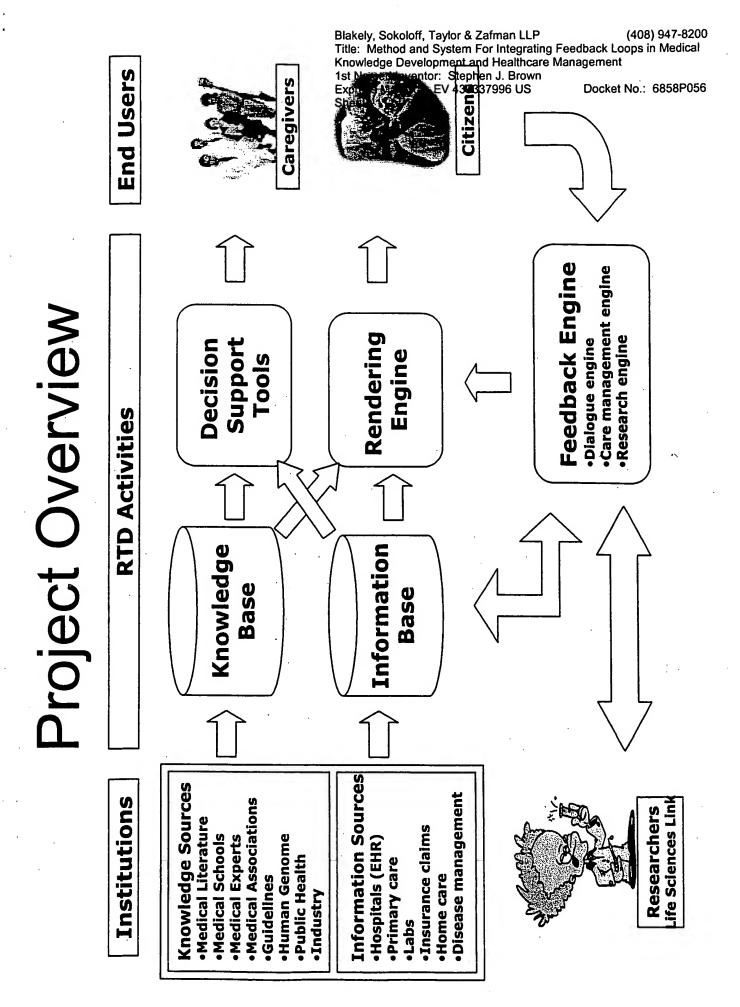
1.3 Knowledge Acquisition → Knowledge Base

1.4 Information and Knowledge Processing → DSTs to

identify gaps between Information Base and Knowledge Base (i.e. gaps between what is and what should be)  Information and Knowledge Rendering → Rendering Engine is the interface to end users

Information and Knowledge Acquisition → The

Feedback Loops



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Information and Knowledge Acquisiti The Feedback Loops

Patient Dialogue Engine: Individualized Communication

→ Generated using Information and Knowledge Base

→ Interface with Rendering Engine

Feedback to Information Base

Care Management Engine: Just-in-time Care

→ Generated using Information and Knowledge Base

Feedback to DSTs

Research Engine: Real-time Research

→ Interface to Dialogue Engine [when new data is required] → Interface to Information Base [extract existing data]

Feedback to Knowledge Base Inew discoveries

# Contribution to Innovations Health Hero Network

### Patient Dialogue Engine

**Current Status** 

- customized programs Pre-packaged, mass
- **Content libraries**
- Health Buddy



- Care Management Engine
- Risk stratification
- Organizational workflow and efficiency tools
- Manual feedback process

### Research Engine

Data Export to SAS

Automated individualization

New Innovations

- Content generated by
- knowledge base rules applied to information base

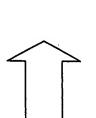
  Interface to Rendering Enginesist Named Inventor: Steben J. Brown Exbress Wail No:: EA 43933269 Cor any device for any device Intelligent risk tuning and links tuning and links to DSTs

  Organizational optimization

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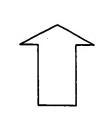
Knowledge Development and Healthcare Management



- Automated feedback loop Identify subgroups and
- Test hypotheses on living database

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correlations

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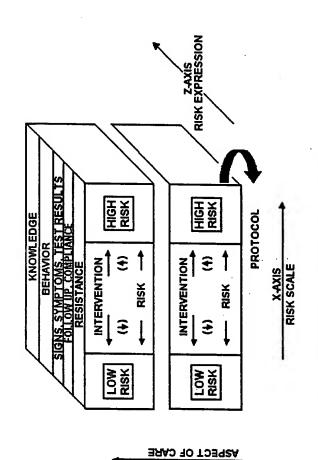
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# ntegrating Feedback Loops Within MedKnowledgeMent

Application Program Interfaces

Standards for Data Classification

**Ontology for Information and Knowledge** Jsed in Feedback Process



**SIXAY** 

A 3-DIMENSIONAL MODEL OF DISEASE

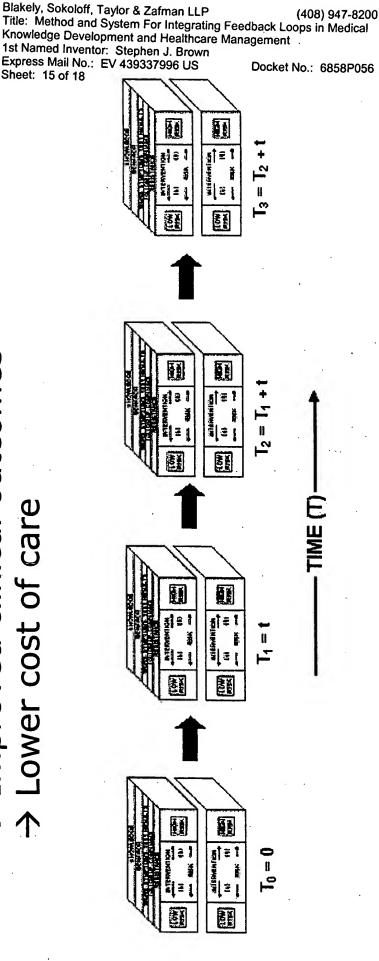
# Feedback Process

knowledge in a continuous process that leads Overall goal is apply and generate medical lowest achievable risk resulting in:

Higher quality of life

Improved clinical outcomes

Lower cost of care



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# Patient Trials

Application to Major Diseases with Great Cost to Society

**Multi-center Demonstration Project** 

Health care and research centers in Europe

Large enough for meaningful result

Small enough to fit budget

Standardized Protocol for Data Collection

**Jutcomes Analysis** 

Aggregate data analysis for global impact

Site specific data analysis by country, disease, and care model

Key measures include: acceptability, satisfaction, utilization, clinical impact, medication compliance, quality of life, cost of care

Medical Review Board

Review and approve all site specific study designs

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# Expected Results

Reduced emergency department encounters and hospitalizations by detecting patient problems before they become a crisis. Improved patient compliance by educating, motivating and monitoring health status and by providing personalized and relevant information.

information to healthcare professionals through quality assured processes Improved safety and quality of care by providing timely and actionable that can be continuously improved.

interconnected monitoring and information systems, rather than fragmented Continuity of care, particularly for the elderly, through integrated, episodic, and crisis driven care.

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healthcare and enable sustained quality and access.

Knowledge is an opportunity for European leadership at the convergence of Creation of an open platform for the application and generation of Medical information technologies, medical and consumer devices, and networks.

Stimulation of investment in information society technologies to modernize

Health is a key IST application for all citizens

Expected benefit to the El

existing and new network infrastructures including broadband and wireless Clinical applications that can be deployed as new service offerings over networks will stimulate the growth and success of those networks. The emerging eHealth sector will become vital to every region in the world that will experience the demands of an aging population and the resulting need for advanced and sustainable models of care